

11. Declaration by Applicant

We hereby state that we shall abide by the rules and regulations of AFST(I) and endeavour to maintain the professional integrity that is expected of us as an AFST(I) Member, if admitted.

Date:.....

Signature:.....

12. Endorsement by Two AFST(I) Life Members And Self Attested Degree Certificate (Endorsement by at least one life member).

1. I,know Dr/Mr/Ms.....
foryears and recommend him/her for membership of AFST(I).

Name:
Address:

Membership No.

Date:

Signature

2. I,know Dr/Mr/Ms.....
For.....years and recommend him/her for membership of AFST(I).

Name:
Address:

Membership No.

Date:

Signature

3. For Student Membership: **[to be endorsed by Head of the Department]**

Mr/Ms.is studying for.....

Degree in our University/Institution for the period from to

Name & Address of the HOD

Signature of the HOD with seal & date